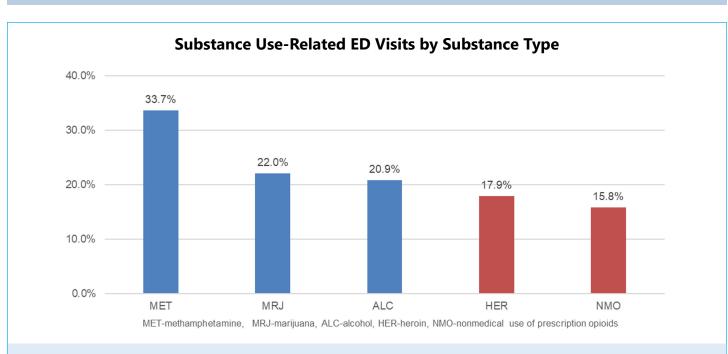
v 1.0 December 2020

DAWN: Heroin and Nonmedical Use of Prescription Opioids

The Drug Abuse Warning Network (DAWN) is a nationwide public health surveillance system administered by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Behavioral Health Statistics and Quality. As of October 15, 2020, data are being abstracted from 49 hospitals. Ultimately, the system will include at least 50 non-Federal general hospitals with 24-hour emergency departments (EDs), consisting of 10 sentinel hospitals and 40 probability-sampled hospitals. Data are abstracted directly from hospital electronic health records. DAWN captures data on ED visits related to recent substance use and misuse, such as alcohol use, illicit drug use, suicide attempts, and nonmedical use of pharmaceuticals.

DAWN data can be used to monitor substance misuse trends and serve as an early warning system to identify new psychoactive substances. Since hospital recruitment is incomplete and the data are *unweighted*, this profile provides only preliminary results that are not generalizable to the US; caution must therefore be exercised in interpreting the data presented here.

This profile presents data on ED visits related to heroin and nonmedical use of prescription opioids (NMO). ED visits related to nonmedical use of prescription opioids are those with documented misuse or abuse of prescription opioids, including taking a dose more than prescribed or recommended, taking someone else's prescribed opioids, and intentional poisoning with prescription opioids by another person. The information provided below summarizes *unweighted* data abstracted from 4/1/2019 to 10/15/2020. The data on alcohol presented here include ED visits related to underage (less than 21 years old) alcohol use and adult (ages 21 years and older) alcohol use in combination with other substances since the abstraction of ED visits for adults involving only alcohol was not yet complete.



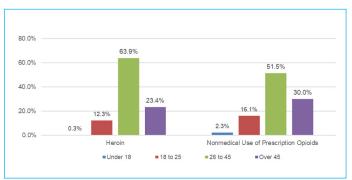
ED visits involving heroin and nonmedical use of prescription opioids (NMO) are among the top substances in this sample of hospitals. Approximately 18% of substance use-related ED visits involved heroin and 16% involved the nonmedical use of prescription opioids.



v 1.0 December 2020

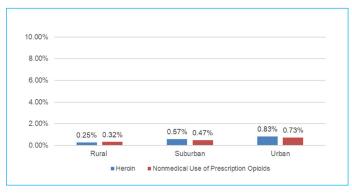
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Heroin and NMO Use-Related ED Visits by Age



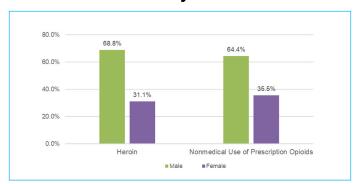
Patients aged 26 to 45 accounted for just under two-thirds (64%) of heroin-related ED visits and more than half (51.5%) of ED visits related to non-medical use of prescription opioids (NMO). Patients over 45 accounted for the second highest group for heroin-related (23.4%) ED visits and nonmedical use of prescription opioid-related (30%) ED visits.

Heroin and NMO Use-Related ED Visits to Total ED Visits by Community Type



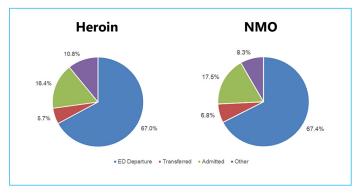
The above graph examines the percent of heroin and nonmedical use of prescription opioid (NMO)-related ED visits to total ED visits by community type. In this graph, the denominator is the number of total ED visits within each community type. Both heroin and non-medical use of prescription opioid-related ED visits were a higher percentage of total ED visits in urban communities (0.83% and 0.73% respectively) and suburban communities (0.57% and 0.47% respectively) as compared to rural communities (0.25% and 0.32% respectively).

Heroin and NMO Use-Related ED Visits by Gender



The gender distribution of heroin-related ED visits and visits related to nonmedical use of prescription opioids (NMO) is similar, with roughly two-thirds of those visits being male patients and one-third being female.

Heroin and NMO Use-Related ED Visits to Total ED Visits by Disposition Type



More than two-thirds of heroin and nonmedical use of prescription opioid (NMO)-related visits (67% and 67.4% respectively) resulted in the patient's release from the ED, such as departing for home or receiving a referral for substance use and/or psychiatric treatment. The second largest disposition category, admitted to the hospital, is also the same for heroin and nonmedical use of prescription opioids at 16.4% and 17.5% respectively.

